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Bib Data Sheet

CONFIRMATION NO. 1313

<b>SERIAL NUMBER</b> 10/604,314	<b>FILING OR 371(c) DATE</b> 07/10/2003 <b>RULE</b>	<b>CLASS</b> 382	<b>GROUP ART UNIT</b> 2624	<b>ATTORNEY DOCKET NO.</b> 21295-58
<b>APPLICANTS</b> Frank Olschewski, Heidelberg, GERMANY;				
<b>** CONTINUING DATA *****</b> <div style="text-align: right;"><i>None</i></div>				
<b>** FOREIGN APPLICATIONS *****</b> GERMANY DE 102 35 656.4 08/02/2002 <div style="text-align: right;"><i>Yes for</i></div>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 09/22/2003</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <div style="text-align: center;"><i>2</i></div> Allowance Acknowledged <div style="text-align: center;"><i>NA</i></div> Initials Examiner's Signature		<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 15
				<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 29127				
<b>TITLE</b> Method and Arrangement For Microscopy				
<b>FILING FEE RECEIVED</b> 750	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	